



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

02/01/2001

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER	→	NJR000033365
INSTALLATION NAME	→	59 HOOK CREEK RD ASSOC LLC
INSTALLATION ADDRESS	→	59 HOOK RD BAYONNE, NJ 07002
MAILING ADDRESS	→	119 W 57TH ST- PENTHOUSE SOUTH NEW YORK, NY 10019

EPA Form 8700-12AB (4-80)

USEPA - REGION 2
RCRA Programs Branch
290 Broadway, 22nd Floor
New York, NY 10007-1866

ATTN: JACK HOYT
Tel : (212) 637-4106
Fax: (212) 637-4949

TO: 59 HOOK CREEK RD ASSOC LLC
or Current Occupant
ATTN: KEN COHEN - MGR
119 W 57TH ST- PENTHOUSE SOUTH
NEW YORK, NY 10019

Please refer to Section V, Line-by-Line Instructions for Completing EPA Form 8700-12 before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

Notification of Regulated Waste Activity

 **EPA** United States Environmental Protection Agency

Date Received
(For Official Use Only)
01 JAN 11 AM 10:43

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☒ A. Initial Notification ☐ B. Subsequent Notification (Complete Item C)

C. Installation's EPA ID Number
NJR0000033365

II. Name of Installation (Include company and specific site name)

59 HOOK CREEK RD ASSOC. LLC

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

59 HOOK ROAD

Street (Continued)

City or Town State Zip Code

BAYONNE NJ 07002-

County Code County Name

017

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

119 WEST 57TH STREET

City or Town State Zip Code

PENTHOUSE SOUTH NY 10019-

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last) (First)

COHEN KEN

Job Title Phone Number (Area Code and Number)

MANAGER 212-265-8151

VI. Installation Contact Address (See Instructions)

A. Contact Address Location Mailing B. Street or P.O. Box

☒ ☐ 119 WEST 57TH, PH SOUTH

City or Town State Zip Code

PENTHOUSE SOUTH NY 10019-

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

59 HOOK CREEK RD ASSOC. LLC

Street, P.O. Box, or Route Number

119 WEST 57TH STREET PENTHOUSE

City or Town State Zip Code

PENTHOUSE NY 10019-

Phone Number (Area Code and Number) B. Land Type C. Owner Type D. Change of Owner Indicator (Date Changed) Month Day Year

212-265-8151 Yes No

Call Mario (732) 613-1660 Spoke to Mario 9:10AM - 1/16/00

Address verified US Post Office

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved, OMB No. 2050-0028 Expires 10/31/00
GSA No. 0246-EPA-OT

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions)

A. Hazardous Waste Activity

1. Generator (See Instructions)
☒ a. Greater than 1000kg/mo (2,200 lbs.)
☐ b. 100 to 1000 kg/mo (220-2,200 lbs.)
☐ c. Less than 100 kg/mo (220 lbs.)
 2. Transporter (Indicate Mode in boxes 1-5 below)
☐ a. For own waste only
☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify

- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity, see Instructions.
 4. Hazardous Waste Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Boiler and/or Industrial Furnace
☐ 1. Smelter Deferral
☐ 2. Small Quantity Exemption
 Indicate Type of Combustion Device(s)
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Recycling Marketer
☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
 2. Used Oil Burner - Indicate Type(s) of Combustion Device
☐ a. Utility Boiler
☐ b. Industrial Boiler
☐ c. Industrial Furnace
 3. Used Oil Transporter - Indicate Type(s) of Combustion Device(s)
☐ a. Transporter
☐ b. Transfer Facility
 4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
☐ a. Process
☐ b. Re-refine

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☐ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s)) ☐

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1 D008	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See instructions.)

1 X 7 5 1	2	3	4	5	6
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X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Name and Official Title (Type or print)

Date Signed

Member, KEN COTTON

1/8/2001

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)